

# Tobacco Cessation Program

## Session 2

### “Knowledge is Power”

#### Table of Contents

What’s Slowing You Down? .....	1
Tobacco – More Bad News .....	2
Nicotine – The Addictive Drug in Tobacco .....	5
Warning: Tobacco Use Can Kill Your Sex Life .....	7
Smokeless Tobacco: <u>Not</u> a Safe Alternative to Cigarettes .....	9
Symptoms of Withdrawal.....	11
Coping Methods .....	12
Withdrawal Symptoms = Symptoms of Recovery .....	13
Are You Ready to Change? .....	15
Why Do You Use Tobacco? .....	17
The Addiction Triangle .....	19
Commitment Statement.....	20
Think Success! Tips for Coping.....	21
Homework .....	22
Fagerstrom Addiction Scale for Smokers .....	23
Modified Fagerstrom Tolerance Questionnaire for Smokeless Tobacco Users.....	24

#### Objectives of this session:

- Understand nicotine addiction
- Understand signs of recovery and discuss coping methods
- Commit to a Quit Date

**Becoming tobacco-free isn’t easy but it is worth the effort.**

**Some of the things a tobacco-free lifestyle will bring you include:**

- |                                     |                                   |
|-------------------------------------|-----------------------------------|
| • Smell better, look better         | • Sleep better                    |
| • Improved sense of taste and smell | • Improved cardiovascular fitness |
| • Improved self-image               | • Improved action of medications  |
| • Regain control of your life       | • No more money wasted on tobacco |
| • More energy                       | • Improved sex life               |

## What's Slowing You Down? Could It Be Tobacco Use?

In the past year, which of the following have you experienced? (Check all that apply.)

- ☐ headaches
- ☐ chest pain
- ☐ trouble breathing, wheezing, shortness of breath, asthma
- ☐ peptic ulcers
- ☐ pain in calf of legs during exercise or sleep
- ☐ sexual dysfunction
- ☐ memory problems
- ☐ sores in mouth, gum disease, tooth loss
- ☐ voice deeper, gravely sounding
- ☐ hoarseness, cough
- ☐ tingling of hands or feet
- ☐ trouble falling asleep
- ☐ tired all the time, no pep or enthusiasm
- ☐ early menopause
- ☐ bladder, breast, cervical, or lung cancer
- ☐ stroke
- ☐ head or neck cancer
- ☐ heart palpitations
- ☐ diabetic complications
- ☐ high cholesterol
- ☐ poor response from medications

Above symptoms researched in 1987 by the American Cancer Society.

All of these symptoms are related to tobacco use. They are not signs of getting older. Quitting tobacco use now will enhance your ability to enjoy the rest of your life.

Begin thinking about your personal reasons for making this change from tobacco use to tobacco freedom. What will you gain? What might you lose? What benefits will you receive?

A behavior change is often hard to stay with long enough to become comfortable with the new pattern. Motivation and commitment can be fuel to power you through the rough spots.

## Tobacco – More Bad News

### Just the Facts

- Tobacco smoke (TAR) contains more than **4,000** known **chemical solids, toxins and carcinogens**.
- **All** tobacco products contain **nicotine**.
- Nicotine *is* a psychoactive **drug** and alkaloid **poison**.
- Nicotine is **addictive**. It causes **dependence, tolerance** and upon cessation, **withdrawal symptoms**.
- The **addiction process** of nicotine is **equal to**, and in many cases, worse than **heroin and cocaine**.
- **Inhaling** tobacco smoke gets a concentrated dose of **nicotine** to the brain in **six seconds**. This is *twice as fast* as **mainlining heroin**.
- **Nicotine** is the **only addictive drug** that is **used constantly**, all day, everyday, day in, day out.
- The **average** pack-a-day smoker inhales tobacco smoke **70,000** times a year.
- The **relapse rate** for nicotine is **as high** as **heroin and cocaine**.
- **Opiate addicts** report that it is harder to do without **nicotine** than it is to give up their drug of choice.
- **Nicotine** is used in **insecticides**.
- All tobacco products will **alter, damage, or destroy** any living tissue with which it comes into contact.
- There are a number of diseases and **disorders** associated with smoking and tobacco use. The most significant are **cancer, heart disease, and cardiovascular, respiratory, gastric, and oral disorders**.
- Pregnant women who smoke **increase** the **risk** of **still** and **premature births, spontaneous abortions, decreased birth weights, and decreased overall health** of the child.
- A **60-milligram** dose of nicotine, taken at one time, will **KILL** the average adult by paralyzing the ability to breathe.
- Premature death from any form of tobacco use leaves others behind to cope without you.
- **Smoking** is the single largest major cause of **cancer** mortality in the U.S. today.
- The **annual** death toll attributed to tobacco use is over **400,000** people. This translates to over **1,000 people per day!**

- Passive/secondary/sidestream (PSS) smoke is the **greatest indoor pollution** problem in our society. Smokers produce approximately **2.25 million metric tons** of tobacco smoke a year. It is estimated that **5,000 nonsmokers** become its victim and die of PSS smoke **each year**.
- **Tobacco use** is the single **most preventable** cause of death in the U.S. today.
- **Puffing** tobacco smoke, using pipes and cigars, transports nicotine through the **mucous membrane** of the mouth.
- There are 30 chemicals in tobacco smoke that cause cancer, and smokeless tobacco products contain 10 times the amount of nitrosamine as cigarettes.
- Smokeless products **are not** safe alternatives to smoking.
- Smokeless users risk a **50-fold** increase in **cheek** and **gum cancer**.
- All tobacco products contain chemicals and carcinogens. Nicotine causes stress on your cardiovascular system. It doesn't matter which vehicle (smoking or using smokeless tobacco) you use to get the nicotine into the body.
- Nicotine content: 1 can of dip = 3 packs of cigarettes (90-150 mg of nicotine)
- Smokers may resort to **using smokeless** tobacco to get a **larger, faster, more frequent** dose of **nicotine**.
- U.S. users **spend** approximately **30 billion dollars** annually on tobacco.
- The average U.S. smoker spends about **\$1000** on tobacco each year.
- Smokers cost companies an estimated **65 billion dollars** per year in **absenteeism** and **higher health care** costs.
- The U.S. Tobacco Industry is a **multi-billion** dollar enterprise that sells a product, which **kills** its user when it is **used as intended**. In order to maintain a **demand level** for its product (More than 1,000 users die each day.), the industry spends in excess of **6.9 million dollars daily** in **advertising**.

In the United States, smokeless tobacco was all the rage in the 1800's; even Dolly Madison was noted as a snuff sniffer. When the TB bacillus was discovered, an anti-tobacco movement ensued. The cigarette machine was invented. By the 1920s, most tobacco was being smoked instead of chewed or sniffed. Today, second hand or environmental tobacco smoke effects are leading the way of many of the cessation efforts.

**Second-Hand Smoke**

Second-hand smoke is called environmental tobacco smoke (ETS). ETS is a mixture of smoke exhaled by the smoker and smoke emitted from the burning end of a cigarette, cigar, or pipe. Former Surgeon General, C. Everett Koop, testified before congress that 2/3 of the smoke from a burning cigarette goes into the environment as side stream smoke.

Why is this ETS so harmful? Take a look at some chemicals found in tobacco smoke:

<b>Nicotine:</b>	an active ingredient in bug spray
<b>Cyanide:</b>	a deadly ingredient in rat poison
<b>Formaldehyde:</b>	laboratory preservative (remember the specimens in biology class?)
<b>Ammonia:</b>	the poisonous gas and powerful cleaning agent used to clean toilets
<b>Arsenic:</b>	a potent ant poison
<b>Methanol:</b>	jet engine and rocket fuel
<b>Cadmium:</b>	a chemical in car batteries
<b>Butane:</b>	the flammable agent in lighter fluid
<b>Acetone:</b>	the poisonous solvent in paint stripper
<b>Toluene:</b>	a poisonous industrial solvent
<b>Polonium-210:</b>	a highly radioactive element
<b>Carbon monoxide:</b>	the poisonous gas in auto exhaust
<b>Benzene:</b>	a poisonous toxin

**Risks to Infants/Children ~**

Small infants and young children exposed to ETS show adverse affects of cognitive ability, are at greater risk for Sudden Infant Death Syndrome, have induced or aggravated asthma conditions, are prone to ear infections, and suffer from acute bronchitis and pneumonia. Studies have shown that children who grow up in homes with smokers are absent from school more often due to illness.

**Work-site Risks ~**

People working in smoking sections of bars and restaurants have four times the risk of lung cancer and twice the incidence of heart disease. Migraine headaches, cataracts, and back pain are more frequent in people who smoke and/or are exposed to ETS on a consistent basis.

**If you, or someone with whom you live smokes tobacco products, and can't become tobacco free now, the next best step is to smoke outside!**

Keeping your home, work site, vehicle, and all indoor areas free of ETS will reduce the health risks to others and to you. It is also one of the preparation steps in treatment for nicotine dependence.



Over 4,000 chemicals have been identified in tobacco products. Carcinogens, the cancer causing substances, are found in ***all tobacco products***. Carbon monoxide (poisonous gas in auto exhaust) is abundant in cigarette smoke. Nicotine is the addictive drug in all tobacco products. It gets people hooked and keeps them using tobacco.

Nicotine stresses the nervous system. It causes the brain to see the use of tobacco as a pleasurable experience. Nicotine is also a very effective appetite suppressant. Hunger is eliminated within 15 minutes of use. Every "hit" of nicotine causes the nervous system to produce a false stress response. The heart rate increases, the blood pressure increases, and the blood vessels constrict. Nicotine is a stressor! The damage that occurs with continued nicotine use is the same as the damage that occurs with unmanaged stress. Nicotine causes this same stress reaction with every hit, and over time, the body does not return to normal. The heart rate is elevated, the blood pressure is elevated, peripheral parts of the body no longer get adequate blood supply, and the immune response is depressed.

Nicotine also produces a physical dependence. Withdrawal symptoms occur when the blood level of nicotine falls. These withdrawal symptoms may include difficulty concentrating, irritability, and sleep disturbances. The longer the body goes without nicotine, the stronger these symptoms become. When the body is once again given a "hit" it feels better. This is why people who are nicotine dependent think tobacco-use relaxes them. Most people with physical nicotine dependence begin to crave nicotine within 30 minutes of their last "hit". At this point the user begins thinking about how to get another "hit".

Nicotine makes the mind see tobacco use as pleasurable. This is **psychological** dependence. A good example of the euphoriant power of nicotine is hearing the tobacco user say, "Well, I really don't want to quit, I like it." Sound familiar? This psychological dependence frequently causes one to feel "out of control." When your mind no longer sees tobacco use as a pleasurable event but rather as a psychological crutch, you will regain your feeling of being in control.

Nicotine is an **appetite suppressant**. Studies show that the average weight gain with tobacco cessation is 2-15 pounds with healthy nutrition and exercise plans. After a year of tobacco freedom, the metabolism seems to readjust and continued weight gain does not occur *unless* eating habits established during the cessation process are unhealthy habits. Attention to establishing and maintaining a high fiber, low fat, heart healthy diet will assist with minimizing weight gain during cessation and set you up for a lifetime of good nutrition care. Research has also found that exercise is a key in maintaining long-term success.

Nicotine is an addictive drug. It often takes 3-7 serious attempts to become tobacco free. According to Thomas Edison, "I have not failed 10,000 times, but have successfully found 10,000 ways that do not work." **SEEK A WAY THAT WORKS!**



We've all seen the ads. Perhaps it is a rugged cowboy drawing in the reins of his horse at the top of a hill overlooking all of Montana to have a smoke. He represents the very picture of virility. But the truth is quite different, even though it's not often mentioned in pamphlets about the dangers of tobacco use. Did you know that men who use tobacco are 50 percent more likely to suffer from impotence than men who do not use tobacco?

### **Nicotine and Impotence**

Nicotine acts as a vasoconstrictor. That is, it constricts the arteries and blood vessels, including those that are responsible for a man's erection. Nicotine also lowers testosterone and other hormone levels in the blood. And it increases the concentrations of fatty acids in the blood, leading to clogged arteries and further restricting blood flow to the genitals.

### **What about Women?**

Women who use tobacco also have cause for concern. There is evidence that tobacco use can interfere with a woman's ability to have an orgasm. Nicotine can also damage ovaries, causing menstrual abnormalities and decreased estrogen production. It can lead to early menopause with such side effects as increased aging and vaginal dryness.

### **Smoking and the Pill**

If you're on the pill, the news is even worse. Women who smoke have a greatly increased risk of heart disease. For instance, women between 30 and 39 years of age who smoke and take the pill are ten times as likely to have a stroke or a fatal heart attack as nonsmokers are. Talk about smoking killing your sex life!



**A Question of Attractiveness**

While we're on the subject of tobacco use and your sex life, consider what tobacco does to your sexual attractiveness. Bad breath, smelly hair and clothes, and yellow teeth and fingers are not exactly a turn-on. And chewing tobacco is just plain gross. When you give up tobacco use, you immediately become more attractive to your tobacco free friends and coworkers.

Perhaps the very real dangers of cancer and heart disease seem remote when you're young and healthy. But your sexual enjoyment is something that tobacco use could affect right now or in the very near future. It's just one more reason to break the nicotine habit.



There is a widely held myth that smokeless tobacco is a safe alternative to cigarettes. Actually it is just as dangerous as smoking.

#### **Myths –**

- Dip/chew is safe
- Because there is no second-hand smoke, there is no harm to others
- Dip/chew is a safe alternative to smoking

#### **How Smokeless Tobacco Works**

Snuff is a cured, ground form of tobacco that can be inhaled or chewed. Dry snuff is inhaled through the nose or placed inside the nostril, while wet snuff is held between the lips or between the cheek and gum. Chewing tobacco is available in several forms including plugs, twists, and loose leaf. In all cases, chemicals from the smokeless tobacco are absorbed into the bloodstream through mucous membranes in the mouth. Because the nicotine in snuff and chewing tobacco is released gradually, their effects seem to last longer than the effects of cigarettes.

#### **Nicotine Absorption in 30 Minutes**

- Chewing Tobacco – 4.5 mg
- Oral Snuff – 3.6 mg
- Cigarettes – 1.8 mg

As you can see, snuff and chew have 3 to 5 times more nicotine than cigarettes, making them much more addictive.

**Physical Effects of Snuff and Chew**

- More chemically addictive than cigarettes.
- Like cigarettes, may cause heart disease and certain kinds of cancer.
- Specific dangers of snuff and chew include gum disease, erosion of teeth and cancer of the mouth and throat.

**Use Increasing Among Young Males**

Many cigarette users have switched to smokeless tobacco over the last several years because of the misconception that where there's no smoke, there's no danger. A study by the U.S. Surgeon General's office shows that smokeless tobacco is more popular now than at any time in the last 50 years and that adolescent males are the fastest growing group of users. If you or any of your friends are using smokeless tobacco, you will surely want to quit once you realize that the dangers of using smokeless tobacco are just as great as the dangers of smoking cigarettes.

***Spitting tobacco juice is just plain gross!***

## Symptoms of Withdrawal

If you use nicotine regularly, you are a drug addict. Yes, nicotine has been shown to be as addictive as heroin. Your body expects the nicotine it gets every day, so you may feel pretty rocky during the time it takes to withdraw. Knowing what to expect and what to do about it, can help you cope. Here are some common symptoms of nicotine withdrawal and tips on dealing with them.



- **IRRITABILITY** – You may feel grouchy, nervous or touchy. Often taking a few deep breaths and letting them out slowly can get you through an attack of the “grouches.” Try not to take your feelings out on those around you; you may feel guilty for it later.
- **FATIGUE** – Nicotine is a stimulant. When you give up that stimulant, you may feel tired, bored and listless. You may also feel fuzzy headed as your body releases toxins as it adjusts to a lack of nicotine. Drink plenty of water to wash these toxins out of your body. Allow yourself enough rest time.
- **INSOMNIA** – You may have trouble getting to sleep. You may dream about tobacco and wake up during the night. Try ending your day with a hot bath, a cup of hot milk and some muscle relaxation exercises. Remember – this will pass.
- **HUNGER** – Tobacco is an appetite suppressant. Giving up tobacco will make you feel extra hungry for a time. Furthermore, your mouth has been conditioned to want something in it at all times. Chew on gum, celery, carrots or other raw vegetables. Suck on lollipops, breath mints, or hard candy. Drink lots of water or diet, caffeine-free soda pop.
- **DEPRESSION** – You may feel as though you've lost a good friend. Remember that these feelings will pass soon. Go ahead and have a good cry. Call a trusted friend and talk about your feelings.
- **COUGHING** – When you stop smoking, your body attempts to clear the mucous clogging your lungs. Also, your body will produce less mucous, thus your mouth and breathing tubes may feel dry. The best thing for this is to drink plenty of water.

## Coping Methods

Remember: this won't last forever. Much of the worst is over in two weeks.

---

---

---

---

---

---

---

---

---

### Suggestions for Coping:

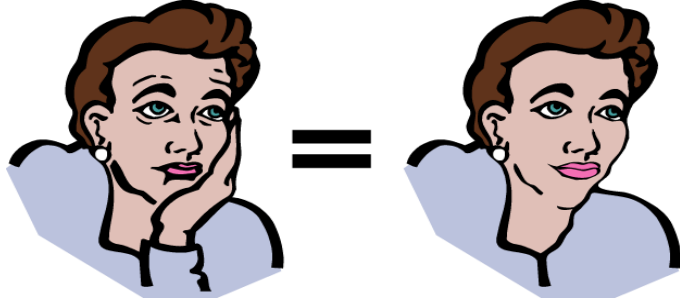
- Start an exercise program
- Make a survival kit
- Use relaxation techniques
- Rest more
- Pamper yourself
- Have a support person
- Avoid caffeine and alcohol
- Avoid places and situations where there are tobacco users

## Withdrawal Symptoms = Symptoms of Recovery

### When You Quit Using Tobacco\* ...

#### Within 20 minutes of the last use of nicotine from tobacco:

- Blood pressure drops to normal
- Pulse rate drops to normal
- Body temperature of hands and feet increase to normal



#### Within 8 hours:

- Carbon monoxide level in blood drops to normal
- Oxygen level in blood increases to normal

#### Within 24 hours:

- Chance of heart attack decreases
- Chance of bleeding ulcers decreases

#### Within 48 hours:

- Nerve endings start to regrow
- Ability to smell and taste improves
- You smell better and skin color improves

#### Within 48-72 hours:

- Nicotine leaves the system

#### Within 72 hours:

- Bronchial tubes relax, making breathing easier
- Lung capacity increases

#### Within 2 weeks to 3 months:

- Circulation improves
- Walking becomes easier

#### Within 1 to 9 months:

- Cough, sinus congestion, and shortness of breath decrease
- Body's overall energy level increases
- Cilia regrow in lungs
- Gum tissue heals and gingivitis decreases

**Within 5 years:**

- Lung cancer death rate for average one pack per day smoker decreases from 137 per 100,000 people to 72 per 100,000 people. After 10 years, lung cancer death rate drops to 12 deaths per 100,000 people, which is the rate for a person who never smoked.

**Within 10 years:**

- Pre-cancerous cells are replaced
- Other cancer risks, mouth, larynx, esophagus, bladder, kidney, and pancreas decrease to that of a non-tobacco user

**All benefits are lost when you smoke just one cigarette or have just one dip.**

\*Adapted from the American Cancer Society

## Are You Ready to Change?

In the next section, you will do self-evaluations. This will help you determine where you are in the process of change. It will help you discover why you use tobacco and help you begin to choose tools to assist you during your immediate cessation process.

According to James Prochaska (Changing for Good, 1994), the first step along the journey of change is to know where you are. A complete description of the process of change, along with specific guidelines for each stage, is outlined in Prochaska's book.

Change frequently takes place in our lives and sometimes without warning. Adapting successfully to change is much more likely when the change is planned. Self-changes have demonstrated success when attention, knowledge, time, and resources are dedicated to the change process.

You have already begun this change process. You started when you identified the problem - *tobacco use*. You have a clear idea of the action you need to take – *stop using all tobacco products*.

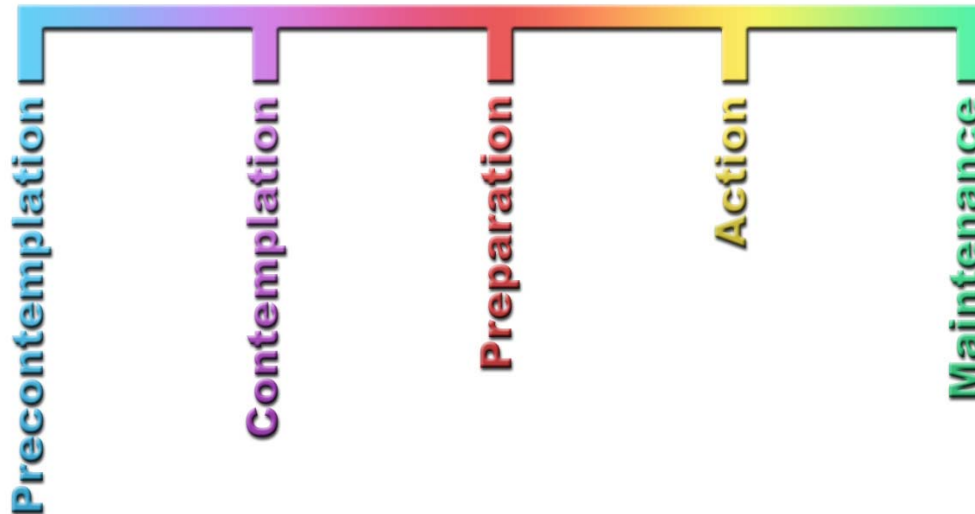
The next step is to assess *your* stage of change. Respond “Yes” or “No” to the following statements about your tobacco use behavior.

1. I have had no tobacco products in more than six months.	<b>Yes</b>	<b>No</b>
2. I have quit tobacco within the past six months.	<b>Yes</b>	<b>No</b>
3. I am intending to set a Quit Date in the next month.	<b>Yes</b>	<b>No</b>
4. I am intending to set a Quit Date in the next six months.	<b>Yes</b>	<b>No</b>



## Evaluate Your Stage of Change

### Stages of Change



#### **"No" to all four questions:**

Precontemplation Stage: You don't really believe you need to change yet. Seek resources regarding tobacco and nicotine dependence. Evaluate your thoughts. Is rationalization and denial keeping you from obtaining the information you need to continue in the change process? (Rationalization is inventing reasons why tobacco use is not a problem for you. Denial is not accepting the harm it is causing you.)

#### **"No" to 1, 2, 3, but "Yes" to 4**

Contemplation Stage: You know you need a change but haven't sought out the information and resources, or you may have tried but relapsed and are now contemplating another try. Seek resources and support to move forward.

#### **"No" to 1 and 2, but "Yes" to 3 and 4**

Preparation Stage: You know you need to change and are actively doing things to get ready to take action. The self-assignments and information in this guide will help you step into ACTION and process through change from tobacco user to tobacco free.

#### **"Yes" to 2, "No" to 1**

Action Stage: Use this guide to keep your momentum going.

#### **"Yes" to 1**

Maintenance Stage: When you can truthfully answer yes to number 1, meaning you have had **NO** tobacco use for six months, you have reached maintenance stage. You should continue on to lifetime tobacco freedom with a plan and continued commitment to a healthy lifestyle.

## Why Do You Use Tobacco?

This questionnaire will help you identify why you use tobacco and where your addiction is the highest. Addiction affects the body in three areas: physically, psychologically and behaviorally (habit). Knowing where your addiction is strongest will help you select the tools and resources to deal with your withdrawal process.

Circle the number that best describes your answer.

	Always	Frequently	Occasionally	Seldom	Never
A. I use tobacco to keep from slowing down.	5	4	3	2	1
B. Handling a cigarette is part of the enjoyment of smoking it.	5	4	3	2	1
C. Smoking is pleasant and relaxing.	5	4	3	2	1
D. I use tobacco when I'm upset about something.	5	4	3	2	1
E. When I run out of tobacco, I find it almost unbearable.	5	4	3	2	1
F. I use tobacco automatically without even being aware of it.	5	4	3	2	1
G. I use tobacco to perk myself up.	5	4	3	2	1
H. Part of the enjoyment of smoking comes from the steps I take to light up.	5	4	3	2	1
I. I find cigarettes pleasurable.	5	4	3	2	1
J. When I feel uncomfortable about something, I use tobacco.	5	4	3	2	1
K. I am very much aware of the times when I am not using tobacco.	5	4	3	2	1
L. I light up a cigarette without realizing I still have one burning in the ashtray.	5	4	3	2	1
M. I use tobacco to give myself a "lift."	5	4	3	2	1
N. Part of the enjoyment of smoking is watching the smoke I exhale.	5	4	3	2	1
O. I want to use tobacco when I am comfortable and relaxed.	5	4	3	2	1
P. When I feel "blue" or want to take my mind off my cares, I use tobacco.	5	4	3	2	1
Q. I get real cravings for tobacco when I haven't used in a while.	5	4	3	2	1
R. I've found a cigarette in my mouth and couldn't remember having put it there.	5	4	3	2	1

## Why Do You Use Tobacco? Add Up Your Score:

Use the following table to score yourself:

1. Enter your circled number for each statement in the space provided, putting the number for statement A on line A, for statement B on line B, and so on.
2. Add the three scores on each line. The sum of your scores on lines A, G and M gives you a total score for the “Stimulation” category, B, H, and N – “Handling,” etc.
3. Transfer your scores to the Addiction Triangle on the next page.

$$\frac{\quad}{A} + \frac{\quad}{G} + \frac{\quad}{M} = \frac{\quad}{\text{Stimulation}}$$

$$\frac{\quad}{B} + \frac{\quad}{H} + \frac{\quad}{N} = \frac{\quad}{\text{Handling}}$$

$$\frac{\quad}{C} + \frac{\quad}{I} + \frac{\quad}{O} = \frac{\quad}{\text{Pleasure}}$$

$$\frac{\quad}{D} + \frac{\quad}{J} + \frac{\quad}{P} = \frac{\quad}{\text{Relaxation/Tension Reduction}}$$

$$\frac{\quad}{E} + \frac{\quad}{K} + \frac{\quad}{Q} = \frac{\quad}{\text{Craving}}$$

$$\frac{\quad}{F} + \frac{\quad}{L} + \frac{\quad}{R} = \frac{\quad}{\text{Habit}}$$

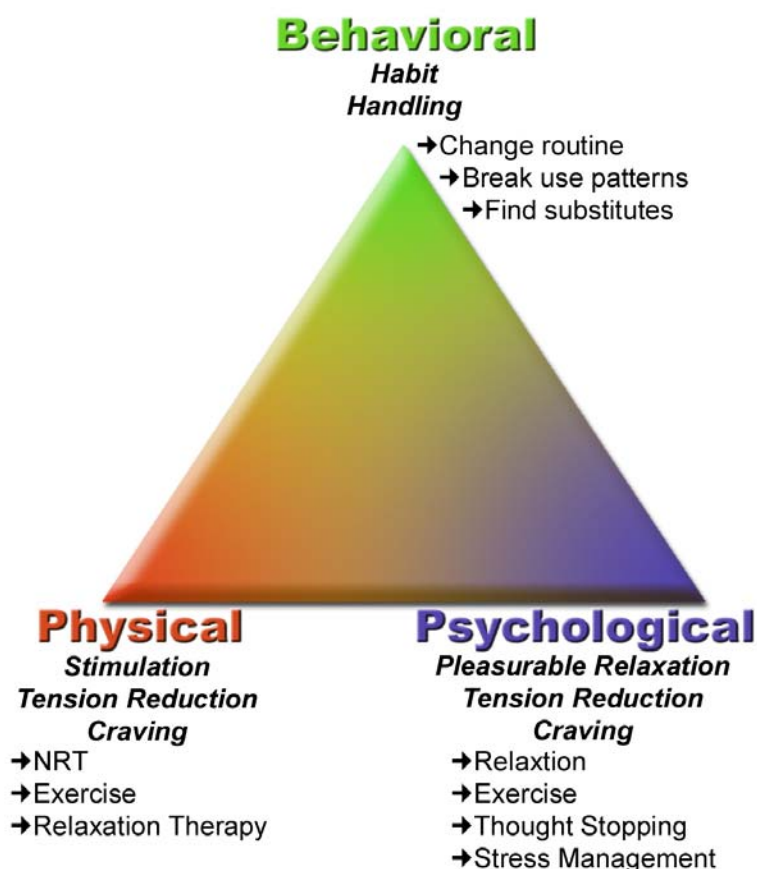
## The Addiction Triangle

The triangle allows you to see the areas in which you will experience the greatest problem in tobacco cessation. Are you rating high in all three angles? If so, NRT is highly suggested to support you during cessation. Rating high in the behavioral and psychological areas? If so, the journal assignments, exercise plan, relaxation exercises, and thought changing activities will be critical to a successful cessation.

Did you score higher than 7 in

- Handling,
- Habit,
- Stimulation,
- Tension reduction,
- Pleasurable relaxation, or
- Craving?

***If you did, circle that word, below.***



Note the nine →TOOLS that will help you in your cessation efforts.



## Commitment Statement

I, \_\_\_\_\_ on the day of \_\_\_\_\_ 20\_\_\_\_,  
commit to giving up all use of tobacco products.

IF or WHEN I get an overwhelming urge to use tobacco products again, I will first  
(write delay tactics here)

---

---

---

---

I will review this commitment statement and the progress I have made in *my quest for tobacco freedom*. Then I will follow my **Tobacco Cessation Plan** before I make a choice to resume use of tobacco products.

If I am using nicotine replacement therapy, I will discontinue use and wait two hours before using any tobacco products.

\_\_\_\_\_  
Your Signature

\_\_\_\_\_  
Date

## Think Success! Tips for Coping

[illegible]

## Homework:

- 1. Complete the appropriate Fagerstrom Addiction Scale.**
- 2. Work on your plan to be tobacco free. A worksheet is included below.**

## Your Plan to be Tobacco-Free

Write out your plan to become tobacco free below. Include your Quit Date, delay tactics, coping strategies, relaxation techniques, and other information from your commitment statement. (i.e. I, Jim Smith, will give up all tobacco use on \_\_\_\_\_. If or when I get an overwhelming urge to use tobacco again, I will run 3 miles before making a decision to resume use.) List all benefits and reasons to be tobacco free – **be creative!**

Copy your plan onto several cards. Put a card on the bathroom mirror; one in your car and stick one on the front of the refrigerator. You can review your reasons, benefits and delay strategies whenever cravings hit!

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.



## Fagerstrom Addiction Scale for Smokers

<b>1. How soon after you wake in the morning do you smoke or first use tobacco?</b>	
a. Within 30 minutes	1
b. More than 30 minutes	0
<b>2. Do you find it difficult not to use tobacco where tobacco is forbidden?</b>	
a. Yes	1
b. No	0
<b>3. Which of all the times you use tobacco during the day is the most satisfying?</b>	
a. First thing in the morning	1
b. Any other time	0
<b>4. How many cigarettes do you smoke a day?</b>	
a. 1-15, light smoker	0
b. 16-25, moderate smoker	1
c. 26 or more, heavy smoker	2
<b>5. Do you use tobacco more in the morning than the rest of the day?</b>	
a. Yes	1
b. No	0
<b>6. Do you use tobacco when you are sick enough to have to stay in bed?</b>	
a. Yes	1
b. No	0
<b>7. What is the tar/nicotine rating of the brand you smoke?</b>	
a. Low tar, 1-8 mgs	0
b. Medium tar, 9-16 mgs	1
c. High tar, 15 or more mgs	2
<b>8. How often do you inhale?</b>	
a. Occasionally	0
b. Often	1
c. Always	2

**Your score =**

**The highest possible score = 11 The closer to zero your score, the less dependent you are on tobacco. The higher the score, the more strongly you are addicted.**

**Modified Fagerstrom Tolerance Questionnaire for Smokeless Tobacco Users**

<b>1. After a normal sleeping period, do you use smokeless within 30 minutes of waking?</b>	
a. Yes	1
b. No	0
<b>2. Do you use smokeless tobacco when you are sick or have mouth sores?</b>	
a. Yes	1
b. No	0
<b>3. How many times do you use per week?</b>	
a. Less than 2	0
b. More than 2	1
c. More than 4	2
<b>4. Do you intentionally swallow your tobacco juices rather than spit?</b>	
a. Never	0
b. Sometimes	1
c. Always	2
<b>5. Do you keep a dip or chew in your mouth almost all the time?</b>	
a. Yes	1
b. No	0
<b>6. Do you experience strong cravings for a dip or chew when you go for more than two hours without one?</b>	
a. Yes	1
b. No	0
<b>7. On average, how many minutes do you keep a fresh dip or chew in your mouth?</b>	
a. 10-19 minutes	1
b. 20-30 minutes	2
c. More than 30 minutes	3
<b>8. What is the length of your dipping day (total hours from first dip/chew in a.m. to last dip/chew in p.m.)?</b>	
a. Less than 14.5 hours	
b. More than 14.5 hours	0
c. More than 15 hours	2
<b>9. On average, how many dips/chews do you take each day?</b>	
a. 1 - 9	1
b. 10 - 15	2
c. >15	3

Your score = \_\_\_\_\_

The highest possible = 16 The closer to zero your score, the less dependent you are on tobacco. The higher the score, the more strongly you are addicted.